## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

10057054

| CLAIMS AS FILED - PART I (Column 1) (Column 2) |   |   |                   |                                    |                              |                  |            | SMALL ENTITY TYPE |                        | OB | OTHER THAN OR SMALL ENTITY |                        |
|--|---|---|-------------------|------------------------------------|------------------------------|------------------|------------|-------------------|------------------------|----|----------------------------|------------------------|
| TOTAL CLAIMS                                   |   |   | 10                |                                    | (Oolariii 2)                 |                  | Ė          | RATE              | FEE                    |    | RATE                       | FEE                    |
| FOR  |   |   | NUMBER FILED      |                                    | NUMBER EXTRA                 |                  |            | BASIC FEE         | 370.00                 | OR | BASIC FEE                  | 740.00                 |
| TOTAL CHARGEABLE CLAIMS                        |   |   | 19 minus 20=      |                                    | * 0                          |                  |            | X\$ 9=            |                        | OR | X\$18=                     |                        |
| INDEPENDENT CLAIMS                             |   |   | / minus 3 =       |                                    | * 5                          |                  |            | X42=              | 210                    | OR | X84=                       | 277                    |
| MUI  | LTIPLE DEPEN  | DENT CLAIM PI                             | RESENT            |                                    |                              |                  | t          | +140=             |                        | OR | +280=                      |                        |
| * If 1   | the difference  | in column 1 is                            | less than ze      | s than zero, enter "0" in column 2 |                              |                  |            | TOTAL             | <b>180</b>             | OR | TOTAL                      |                        |
| CLAIMS AS AMENDED - PART II                    |   |   |                   |                                    |                              |                  |            |                   | 76                     | l  | OTHER                      | THAN                   |
| (Column 1) (Column 2) (Column 3)               |   |   |                   |                                    |                              |                  |            | SMALL E           |                        | OR | SMALL                      | ENTITY                 |
| AMENDMENT A                                    | * * * * * * * * * * * * * * * * * * *   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                   | HIGH<br>NUM<br>PREVIO<br>PAID      | BER<br>OUSLY                 | PRESENT<br>EXTRA |            | RATE              | ADDI-<br>TIONAL<br>FEE |    | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total   | * 19                                      | Minus             | ** 0                               | 0                            | = 0              |            | X\$ 9=            |                        | OR | X\$18=                     |                        |
|  | Independent   | * /                                       | Minus             | ***                                | 8                            | = ()             | 1 [        | X42=              | 0                      | OR | X84=                       |                        |
| L  | FIRST PRESE   | NTATION OF M                              | ULTIPLE DEF       | PENDEN                             | PCLAIM                       |                  | <b>,</b> [ | +140=             | 0                      | OR | +280=                      |                        |
| e.   |   |   |                   |                                    |                              |                  |            | TOTAL             | ()                     | OR | TOTAL<br>ADDIT. FEE        |                        |
|  |   | (Column 1)                                |                   | (Colu                              | mn 2)                        | (Column 3)       |            | DDIT. FEE         |                        |    | ADDII. FEE                 |                        |
| AMENDMENT B                                    | · · · · · · · · · · · · · · · · · · ·   | CLAIMS REMAINING AFTER AMENDMENT          |                   | HIGH<br>NUM<br>PREVI               | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |            | RATE              | ADDI-<br>TIONAL<br>FEE |    | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total   | *   | Minus             | **                                 |                              | =                | ] [        | X\$ 9=            |                        | OR | X\$18=                     |                        |
|  | Independent   | *   | Minus             | ***                                |                              | =                | ┇          | X42=              |                        | OR | X84=                       |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                   |                                    |                              |                  |            | +140=             |                        | OR | +280=                      |                        |
|  |   |   |                   |                                    |                              |                  | L          | TOTAL             |                        |    | TOTAL<br>ADDIT. FEE        |                        |
|  |   | (Column 1)                                |                   | (Colu                              | mn 2)                        | (Column 3)       |            | ADDIT. FEE        |                        | •  | ADDII. FEL                 |                        |
| AMENDMENT C                                    |   | CLAIMS REMAINING AFTER AMENDMENT          |                   | HIGH<br>NUM<br>PREVI               | HEST<br>MBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |            | RATE              | ADDI-<br>TIONAL<br>FEE |    | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total   | *   | Minus             | **                                 |                              | =                | ] [        | X\$ 9=            |                        | OR | X\$18=                     | ,                      |
|  | Independent   | *   | Minus             | ***                                | T OL 411                     | -                | ┧┟         | X42=              |                        | OR | X84=                       |                        |
| L  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                   |                                    |                              |                  |            | +140=             |                        | OR | +280=                      |                        |
| *  | If the entry in colu  | ımn 1 is less than                        | the entry in colu | ımn 2, writ                        | te "0" in co                 | olumn 3.         | _ <b>L</b> | TOTAL             |                        |    | TOTAL                      |                        |
| #A1  | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |                   |                                    |                              |                  |            |                   |                        |    |                            |                        |